HW

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 1-7-64

Sinka Lettingli (Linda Pettingell) Docket No.: 53807-00043USP1

(PATENT)

JUL 0 9 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Bernd Möller et al.

Application No.: 10/606684

Art Unit: 2681

Filed: June 26, 2003

Examiner: Not Yet Assigned

For: APPLICATION FOR TESTING ELECTRONIC

EQUIPMENT DURING MANUFACTURING

FIRST PRELIMINARY AMENDMENT

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

Prior to examination on the merits, please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.

OIP E JOJS, JOHN STRANGE

AMENDMENT TRANSMITTAL LETTER						Docket No. 53807-00043USP1	
Application No. 10/606684-Conf. #5302		Filing Date June 26, 2003		Examiner Not Yet Assigned		Art Unit 2681	
Applicant(s): Bernd Möller et al.							
Invention: APPLICATION FOR TESTING ELECTRONIC EQUIPMENT DURING MANUFACTURING							
TO THE COMMISSIONER FOR PATENTS Transmitted herewith is an amendment in the above identified application							
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.							
		CLAIM	IS AS AMENI	DED			
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	Amenan	- 20 =	F 1030	X			
Independent Claims		- 3 =		х			
Multiple Dependent Claims (check if applicable)							
Other fee (please specify):							
TOTAL ADDIT	IONAL FEE FO	OR THIS AME	NDMENT:			0.00	
x Large Entity Small Entity							
x No additional fee is required for this amendment.							
Please charge Deposit Account No in the amount of \$ A duplicate copy of this sheet is enclosed.							
A check in the	ne amount of \$	1	to cover	the filing fee is encl	losed.		
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The Director is hereby authorized to charge and credit Deposit Account No. 10-0447 as described below. A duplicate copy of this sheet is enclosed.							
x Credit any overpayment.							
x Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.							
Ross T. Robinson Dated: July 7, 2004							
Attorney Reg. No.: 47,031							
JENKENS & GILCHRIST, A PROFESSIONAL CORPORATION 1445 Ross Avenue, Suite 3200 Dallas, Texas 75202 (214) 965-7300							
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shown below. Dated: 7-7-04 Signature: Sinds Pettingell (Porol Mitchell)							